Approved for use through 7/31/2006. OMB 0651-0032

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								ess it displays a valid OMB control number Application or Docket Number		
APPLICATION AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY			OTHER THAN R SMALL ENTITY		
FOR BASIC FEE (37 CFR 1.16(a), (b), or (c))	NUMBER FI	LED N	UMBER EXTRA	- -	RATE (\$)	FEE (\$)]	RATE (\$)		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))				┨ ╎		 	-			
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS				7		 	\dashv	ļ	+	
(37 CFR 1.16(i))	min	us 20 = •			X =	 	OR	×	=	
(37 CFR 1.16(h))		us 3 = •] [,	(=	1	7			
FEE (37 CFR 1.16(s)) sheets of paper, the is \$250 (\$125 for sn additional 50 sheets		r, the applicatio or small entity) neets or fraction)(1)(G) and 37 (or fraction thereof. See 3) and 37 CFR 1.16(s).							
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If the difference in column 1 is less than zero, enter "0" in column 2. APPLICATION AS AMENDED - PART II					TOTAL			TOTAL		
Total	ILAIMS MAINING FTER NOMENT Minus	(Column 2) HIGHEST NUMBER PREVIOUSL' PAID FOR	PRESENT EXTRA		SMALL (ADDI- TIONAL FEE (\$)	OR	OTHE SMALI RATE (\$)	R THAN ENTITY ADDITIONAL	
(37 CFR 1.16(i))	Minus	103	=	- <u> </u> -	25=		-OR_	×50=	FEE (\$)	
Application Size Fee (9 1	TY		- ×	IQO =		OR	× 200 =	 	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))			-				<u> </u>			
	THE COLFEN	DENT CLAIM (37 (CFR 1.16(j))		TAL		OR			
10 -1					D'L FEE		OR	TOTAL ADD'L FEE		
CL REM	umn 1) AIMS AINING TER	(Column 2) HIGHEST NUMBER	(Column 3) PRESENT	R	ATE (\$)	ADDI-		DATE (0)	 	
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(37 CFR 1.15(i)) Independent (37 CFR 1.16(h)) Application Size Fee (37	Minus	···	=	x	=		OR	Х =		
Application Size Fee (37	7 CFR 1.16(s))			×	=		OR	X =		
FIRST PRESENTATION OF		ENT CLAIM (37 CF	R 1.16(i))	-			F			
If the entry in column 1 is If the "Highest Number P If the "Highest Number P	s less than the ento	(in only and a			LFEE		OR OR	TOTAL ADD'L FEE		

"If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20".

The 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.